



## Application Data Sheet

### Inventor Information

Inventor One Given Name:

Family Name:

Name Suffix:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

Country of Residence:

Citizenship Country:

[repeat for additional inventors]

If the inventor is deceased or, if a petition under 37 CFR 1.47(b) is filed, or if the application is filed by the Administrator of NASA, the application data sheet should also include information for the applicant:

Given or Company Name of Applicant:

Family Name, if any:

Name Suffix:

Authority Code:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

County of Residence:

Citizenship Country

### **Correspondence Information**

Name Line One:

Name Line Two:

Address Line One:

Address Line Two:

City:

State or Province:

Country:

Postal or Zip Code:

Telephone:

Fax:

Electronic Mail:

### **Application Information**

Title Line One:

Title Line Two:

[Repeat for any additional lines]

Application Number:

Filing Date:

**Suggested classification:**

Suggested Tech. Center:

Total Drawing Sheets:

Suggested Dwg. Figure for Pub.:

Docket Number:

Application Type: [Utility]

Licensed US Govt. Agency:

Contract or Grant Numbers One:

Contract or Grant Numbers Two:

Secrecy Order in Parent Appl.?

If plant patent app.,

Latin name of genus and species of plant claimed:

**Representative Information**

Registration Number One:

Registration Number Two:

[Repeat for extra registration numbers]

**Domestic Priority Information**

This application is a: [Continuation of]

Application One:

Filing Date:

which is a:

Application Two:

Filing Date:

[repeat as necessary]

### **Foreign Application Information**

Foreign Application One:

Filing Date:

Country:

Priority Claimed: [Yes or No]

### **Assignee Information**

Name of assignee:

Address Line One:

Address Line Two:

City:

State or Province:

Country:

Postal or Zip Code: